

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003079

Entity Name: NEW HORIZON CHURCH, UNITED METHODIST
CONGREGATION, CHARITABLE ENTITY, INC.**Current Principal Place of Business:**201 OAK AVE E
HAINES CITY, FL 33844**Current Mailing Address:**P.O. BOX 455
HAINES CITY, FL 33845 US**FEI Number: 59-1573252****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANDERSON, JOYCE
201 OAK AVE E
HAINES CITY, FL 33844 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TC
Name	CHRISTENSON, HAROLD
Address	3060 HWY 17-92 LOT 111
City-State-Zip:	HAINES CITY FL 33844

Title	T
Name	CREWS, CURTIS
Address	207 E. MAPLE ST P.O. BOX 1018
City-State-Zip:	DAVENPORT FL 33836

Title	T
Name	LARSON, DARIN
Address	1004 AQUA VISTA DR.
City-State-Zip:	HAINES CITY FL 33844

Title	T
Name	YAEGER, BILL
Address	304 ST. GEORGE DRIVE
City-State-Zip:	DAVENPORT FL 33837

Title	SEC
Name	WEED, JULIE
Address	1701 COMMERCE AVE., LOT 63
City-State-Zip:	HAINES CITY FL 33844

Title	T
Name	HENSELER, WIL
Address	750 MYSTERY HOUSE ROAD
City-State-Zip:	DAVENPORT FL 33837-9063

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIE WEED**TRUSTEE****02/12/2013**

Electronic Signature of Signing Officer/Director Detail

Date